EXTENDED TO JULY 17, 2017

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

C FOI LI	e 2015 Calendar year, or tax year beginning	SEP 1, 2013 and	rending z	100 31, 2010				
Check if applicat	THE UNIVERSITY OF TEXA	S INVESTMENT		D Employer identific	cation number			
chan	e MANAGEMENT COMPANY			74.3	765000			
chan	Pe Doing business as		<u> </u>	74-2765082				
retur			Room/suite		225-1600			
——Jreturi termi								
ated Ame	City or town, state or province, country, and AUSTIN, TX 78701	ZIP or foreign postal code		G Gross receipts \$	31,562,760			
returi Appl		ע אא סאובים		H(a) Is this a group re				
tion pend	F Name and address of principal officer 1221	VITE 2800, AUSTI	N, TX	for subordinates				
T		(insert no) 4947(a)(1)		H(b) Are all subordinates in				
	te: NWW.UTIMCO.ORG	(IIISEIT 110) 4947(a)(1)	01 327		list (see instructions)			
		ssociation Other	I Van	H(c) Group exemption	State of legal domicile. T			
	Summary	oscolatori calci >		Of Iorniadon 1990 N	1 State of legal dofffiche. 12			
T 4		t suspitional activities SEE	SCHEDU	TLE O	<u></u>			
Activities & Governance	Briefly describe the organization's mission or mos	t significant activities DDD	ВСПЕВО	JEE C				
E 2	Check this box If the organization disco	ontinued its operations or dispo	ead of mar	a than 25% of its not as	ente			
3	Number of voting members of the governing body	osea oi illoi	3	Sers				
3 3	Number of voting members of the governing body	•		3	8			
5 1	Total number of individuals employed in calendar			5	87			
5 5	Total number of individuals employed in calendar Total number of volunteers (estimate if necessary			6	<u>_</u>			
0	•		+	7a	0.			
	Total unrelated business revenue from Part VIII, c			 	0.			
- 6	Net unrelated business taxable income from Form	1 990-1, III1e 34		7b				
	Contributions and greats (Dort VIII June 16)		<u> </u>	Prior Year 0.	Current Year 0			
8	Contributions and grants (Part VIII, line 1h)		<u> </u>	25,436,194.	31,527,266.			
9 10	Program service revenue (Part VIII, line 2g)		9,069.	32,062.				
	Investment income (Part VIII, column (A), lines 3, 4	-	0.	32,002.				
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8	-	25,445,263.	31,559,328.				
12	· · · · · · · · · · · · · · · · · · ·		25,445,205.	0.				
13	Grants and similar amounts paid (Part IX, column		- } }	0.	0.			
14	Benefits paid to or for members (Part IX, column	A), line 4)	io! H	19,465,187.	19,996,194.			
15	Salaries, other compensation, employee benefits			0.	0.			
וט	Professional fundraising fees (Part IX, column (A)		100. H					
<u> </u>	Total fundraising expenses (Part IX, column (D), fire	L' —	10.Q -	5,494,479.	6,847,355.			
''	Other expenses (Part IX, column (A), lines 11a-11c	4 10 mg 10 m	`` # 	24,959,666.	26,843,549.			
18	Total expenses Add lines 13-17 (must equal Park	- NA.	_ !' -	485,597.	4,715,779.			
<u>၂19</u>	Revenue less expenses Subtract line 18 from line	12						
ances 20			<u> </u>	eginning of Current Year	End of Year 20,733,090.			
쬬I	Total assets (Part X, line 16)		_	16,276,350. 10,472,685.	10,213,646.			
E 21	Total liabilities (Part X, line 26)		-	5,803,665.	10,519,444.			
	Net assets or fund balances Subtract line 21 from	n line 20		_ 3,003,003.	10,313,444			
Part II	<u> </u>				1			
	alties of perjury, I declare that I have examined this return ct, and complete. Declaration of preparer (other than offic				Knowledge and belief, it is			
ue, come		er) is based on all illionitation of w	лиси ргераге	r has any knowledge	M 20.0			
	Signature of officer			Date	<u> 1, 2011</u>			
ign	1'	v //	•					
ere	Type or print name and title	OIR., CORP.SEC.&	IKEAS	•	 <u></u>			
		December's supporture		Date Check	PTIN			
aid	Print/Type preparer's name	Preparer's signature		if				
	Erm's page	<u> </u>		self-employe	d [
reparer	Firm's name			Firm's EIN				
se Only	Firm's address			Dt				
				Phone no				
	RS discuss this return with the preparer shown ab				Yes No			
	16.15 LHA For Panerwork Reduction Act Note				Form 990 (2016			

Form	990 (2015) MANAGEMENT COMPANY	74-2765082 Page 2
	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	SEE SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
3	If "Yes," describe these changes on Schedule O	TesNO
4		magazirad by avacases
4	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	
		ers, the total expenses, and
4-	revenue, if any, for each program service reported. (Code) (Expenses \$ 22,806,316 · including grants of \$) (Reven	ues 31,527,266.
4a	(Code) (Expenses \$ 22,806,316 including grants of \$) (Reven INVESTMENT OF FUNDS UNDER THE CONTROL AND MANAGEMENT OF	
		THE BOARD OF
	REGENTS OF THE UNIVERSITY OF TEXAS SYSTEM.	
		<u></u>
4b	(Code) (Expenses \$	ue \$
		
4c	(Code) (Expenses \$) (Reven	ue \$
		- ' -
		· · · · · · · · · · · · · · · · · · ·
•		
		
4d		
	(Expenses \$ Including grants of \$) (Revenue \$	
4e	Total program service expenses ▶ 22,806,316.	

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THE UNIVERSITY OF TEXAS INVESTMENT MANAGEMENT COMPANY

Form 990 (2015) MANAGEMENT C
Part IV Checklist of Required Schedules

1 Is the organization described in section 50 (10(3) or 4987(a)(1) other than a private foundation)? If 'Yes,' complete Schedule A. Schedule B. Schedule of Contribution? 2 Is the organization required to complete Schedule B. Schedule of Contributions 3 A X 2 Is the organization required to complete Schedule C. Part II 3 A X 3 B A X 3 B A X 4 A X 5 Section 50 (16(4) organization and the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 5 D A the organization association on Revenue Procedure 88-197 If 'Yes,' complete Schedule C, Part III 6 D A D A the organization and the organization of the organization that receives membership dues, assessments, or smill armounts as defined in Revenue Procedure 88-197 If 'Yes,' complete Schedule C, Part III 6 D A D A the organization maintain any donor advised funds or any similar funds or accounts' If 'Yes,' complete Schedule D, Part II 7 D A the organization maintain any donor advised funds or any similar funds or accounts' If 'Yes,' complete Schedule D, Part II 8 D A C A Revenue and A A C A A A A A A A A A A A A A A A A				Yes	No
2 Is the organization required to complete Schedule 6, Schedule of Contributoria? Did the organization engage in direct or uniforce optical ampaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part If Section 801(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)) election in effect during the tax year If "Yes," complete Schedule C, Part If Is the organization as esterion 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c), or 501(1	* * * * * * * * * * * * * * * * * * * *	1	х	
3 Det the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public direct if "Yes", "complete Schedule C, Part II Section 501(x)3 organizations. Did the organization engage in lobbying activities, or have a section 501(th) election in effect during the tax year if "Yes", "complete Schedule C, Part III Did the organization a section 501(th) (4), 501(c)(s), 601(c)(s),	2	·			X
Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule C, Part III is the organization ascertion 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99-19? If "Yes," complete Schedule C, Part III organization maximal and yorion advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II or Did the organization end areas, or historic structures? If "Yes," complete Schedule D, Part II organization maximal collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II organization maximal collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II organization intend in Part X, ine 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or dobt negotiation services? If "Yes," complete Schedule D, Part II organizations answer to any of the following questions is "Yes," then complete Schedule D, Part VI II the organizations is nawn to any of the following questions is "Yes," then complete Schedule D, Part VI II the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI II organization report an amount for investments or other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI II organization report an amount for investments is program related in Part X, line 10? If "Yes," complete Schedule D, Part VI II organization report an amount for investments is program related in Part X, line 10? If "Yes," complete Schedule D, Part XI II II X X II II X X II II X X II II	3				
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5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 93:19? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any conor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? III "Yes," complete Schedule D, Part II 7 Did the organization reserved in roll of a conservation easement, including easements to preserve open space, the environment, historical areas, or historic structures? III "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization descrived in the following questions is "Yes," then complete Schedule D, Part VI 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI 11 If the organization report an amount for investments other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 14 Did the organization report an amount for investments other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II 15 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total as	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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6 Did the organization maintain any donor advised funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for interest Schedule D, Part V Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V Did the organization report an amount for investments - organization assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V Did the organization report an amount for orwestments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization report an amount for orwestments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization or sport an amount for orwestments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization or short an amount for orwestments - program related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization or short and account	5		_		v
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7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization manual collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization or port an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization or show or use to the following questions, as applicable 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V 12 If the organization report an amount for land, buildings, and ecupement in Part X, line 107 If "Yes," complete Schedule D, Part V 13 Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part VII 14 Did the organization report an amount for revestments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XII 15 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XI 16 Did the organization report an amount for other assets in Part X, line 158 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 17 Did the organization report an amount for other assets in Part X, line 158 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 18 Did the organization report an amount for other assets in Part X, line 158 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complet	6	, , , , , , , , , , , , , , , , , , ,	•		Y
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complete Schedule G, Part III X			18		X
	19	* * *	4-	l	v
		complete Scriedule G, Part III		000	

Page 4

Pai	t IV Checklist of Required Schedules (continued)		r	
	Dilling the second of the seco	<u></u>	Yes	No X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		-
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24		Х
22		21	 	 ^
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	İ	X
00		14		<u>^ </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		ļ	
	Schedule J	23	х	
240	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25a	24a		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270	 	-
·	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200	 	
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		Ī	
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		l	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Ī	Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	L	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		l	
	Part V, line 1	34	X	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity] '		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1	1	
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	_37	 -	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		- v	
	Note. All Form 990 filers are required to complete Schedule O	38	Х	I

Statements Regarding Other IRS Filings and Tax Compliance Check of Schedule O contains a response or note to any line in this Part V	Form	990 (2015) MANAGEMENT COMPANY 74-2765	082	D	age 5
The Enter the number reported in Box 3 of Form 1098, Enter -0-if not applicable 1a 12 15 10 1				·	age o
tale Emer the number reported in Box 3 of Form 1096. Emer -0" in not applicable be Emer the number of forms Wisc Gincluded in the 1 at Emer -0" in not applicable by memory of the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) with now with sex with the year covered by this return. 2a Enter the number of emilyoses reported on Form W.3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2b If at least one is reported on line 23, did the organization life all required floating the year? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to elfe (see enstructions). 3c If Yes, that is the did from 300 T for this year? If Wo, 1 for line 3b, provide an explanation in Schedule 0. 3d At any time during the calendar year, did the organization have a minerest in, or a signature or other authority over, a financial account in a foreign country (such as a ben't account, securities account, or other financial Accounts (FBAR). 3d Was the organization and the foreign country. 5e enstructions for filing requirements for FinCRN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions with a wear to a party to a prohibited tax scheductible? 7b Organizations that may receive deductible contributions under section 170(c). 8c If Yes, 1 did the organization incude with every solicitation an express statement that such contributions or gifts were not tax deductible as charlable contributions? 7c Organizations that may receive deductible contributions under section 170(c). 8c If Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charlable contributions. 8c If Yes, 1 did the organization include on the section 170(c). 9c					
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b Eiter the number of Forms W25 included in line 1 a. Enter 0-1 not applicable of Did the organization comply with backup with bidding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize womens? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendary year ending with or within the year covered by this return. Find the sum of lines 1 and 2 as genetar than 250, you may be required to e-fife (see instructions). 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b. If "Yes", has filled a Form 900 Tor this year? If "No", to line 25, provide an explanation in Schedule O. 4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, such crise account in a foreign country (such as a bank account, securities account; or other financial account)? 4a. X. Yes the organization apparty to a prohibited tax shelter transaction at any time during the tax year? 5b. Did any translet party notify the organization than it was or as party to a prohibited tax shelter transaction at any time during the tax year? 5a. Was the organization apparty to a prohibited tax shelter transaction at any time during the tax shelter transaction? 5c. If "Yes." did the organization file Form 8888.1? 6c. Did the organization should the organization file Form 8888 art year to a prohibited tax shelter transaction or girts were not tax educutible? 7b. If "Yes." did the organization microlle with every solicitation an express statement that such contributions or girts were not tax educutions or account that were not tax educutible or a foreign transplant organization shelt may receive deductible contributions or girts are contributions or girts are contributions or girts are c	12	Enter the number reported in Box 3 of Form 1096. Enter -0, if not applicable.	F	103	1.10
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3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b if Yes, "has it field a Form 990 T for this year? if "No," to <i>line 3b, provide an explanation in Schedule O</i> a All any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes, "errer the name of the foreign country P					
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9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Did 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			i
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			140	-	x
					
	D	1005, That it filed a 1 offit file to report these payments in tho, provide an explanation in ocheouse of		990	(2015)

MANAGEMENT COMPANY

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Form 990 (2015) MANAGEMENT COMPANY 74-2765082 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI						X				
Sec	tion A. Governing Body and Management										
						Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		9							
	If there are material differences in voting rights among members of the governing body, or if the governing				- 1						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.										
b	Enter the number of voting members included in line 1a, above, who are independent	1b		8	-						
2											
	officer, director, trustee, or key employee?			2	:]		X				
3											
	of officers, directors, or trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?										
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5			X				
6	Did the organization have members or stockholders?			6	; [X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or								
	more members of the governing body?			7:	a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or								
	persons other than the governing body?			71	ь	Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following	(П	-					
а	The governing body?			8	а	X					
b	Each committee with authority to act on behalf of the governing body?			81	ь	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched a	at the		П						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O] g			X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	e Code)								
						Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10	a		Х				
ь	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napter	s, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	ь						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11	la	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12	2a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12	ъ	X					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe								
	ın Schedule O how this was done			12	2c	X					
13	Did the organization have a written whistleblower policy?			1	3	X					
14	Did the organization have a written document retention and destruction policy?			1	4	Х					
15	Did the process for determining compensation of the following persons include a review and approva	al by in	ndependent				-				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						Ì.,				
а	The organization's CEO, Executive Director, or top management official			15	ia	X					
b	Other officers or key employees of the organization			15	ь	X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	vith a	1	[
	taxable entity during the year?			16	a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its p	participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n's								
	exempt status with respect to such arrangements?			16	b						
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Sect	ion 501(c)(3)s only) avai	labi	e					
	for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X Upon request Other (explain	ın Scl	nedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, a	nd fin	anc	ial					
	statements available to the public during the tax year		•								
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks ar	nd records								
	UTIMCO-KIM BAUER - 512-225-1600				_						
	401 CONGRESS AVENUE, SUITE 2800, AUSTIN, TX 78701										

MANAGEMENT COMPANY

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Form 990 (2015) Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees, and former such persons

Check this box if neither the organization i	T	d organization compensate (C)					ารลเ	(D)	(E)	(F)
Name and Title	(B) Average			ر Pos		1		Reportable	(E) Reportable	Estimated
Name and Tide	hours per		(do not check more than one box, unless person is both an					compensation	compensation	amount of
	week	offi	cer an	d a d	recto	ector/trustee)		from	from related	other
	(list any	ico Scor		İ				the	organizations	compensation
	hours for	a dir	l	ĺ	l	sted		organization	(W-2/1099-MISC)	from the
	related	slee (ruste			bensa		(W-2/1099-MISC)	'	organization
	organizations below	lan Tr	leuo		ploye	1 com				and related organizations
	line)	Individual trustee or director	nstitutional tre	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) JEFFERY D. HILDEBRAND	1.00	╌	=	۴	Ť	==	-			
DIRECTOR/CHAIRMAN		x		x				0.	0.	0.
(2) ARDON E. MOORE	1.00		Г	\vdash					·····	
DIRECTOR/VICE CHAIRMAN		X		Х				0.	0.	0.
(3) WILLIAM H. MCRAVEN	1.00									
DIRECTOR/VICE CHAIRMAN FOR POLICY	39.00	X		X				0.	1,394,060.	35,831.
(4) KYLE BASS	1.00									
DIRECTOR		X						0.	0.	0.
(5) R. STEVEN HICKS	1.00						İ		_	_
DIRECTOR		X	<u> </u>		L		L	0.	0.	0.
(6) H. LEE S. HOBSON	1.00	ļ							_	_
DIRECTOR		X	<u> </u>	<u> </u>				0.	0.	0.
(7) JOHN D. WHITE	1.00			•						
DIRECTOR	1	X	L	ļ	L.		_	0.	0.	0.
(8) PHIL ADAMS	1.00	١								
DIRECTOR	1 00	X	Ļ.,	ļ	_			0.	0.	0.
(9) DAVID J. BECK	1.00	ļ.,								
DIRECTOR	1 00	X	ļ	╙	<u> </u>	ļ		0.	0.	0.
(10) RAY NIXON	1.00	X	i					0.	0.	_
DIRECTOR	1.00	<u> </u>	L	⊢	ļ	\vdash	_	ļ	V •	0.
(11) RAY ROTHROCK DIRECTOR	1.00	x	l					0.	0.	0.
(12) BRUCE E. ZIMMERMAN	40.00	₽	-		┢		<u> </u>		0.	0.
CEO & CIO	40.00	ł		x	Į		l	2,365,299.	0.	1488606.
(13) MARK J. WARNER	40.00	┢	╁	 ^`	\vdash	├	<u> </u>	2,303,233.		1400000
SENIOR MANAGING DIRECTOR	1000	ł	İ	x				944,887.	0.	760,402.
(14) JOAN B. MOELLER	40.00	├─	┢	 	1		\vdash	3270071		70071021
SR.MNG.DIR. CORP.SEC.& TREASURER	1	1		x				588,287.	0.	255,097.
(15) LINDEL EAKMAN	40.00	\vdash		Ť	\vdash	<u> </u>				
MANAGING DIRECTOR		1		х				758,813.	0.	40,064.
(16) MARK SHOBERG	40.00	T								
MANAGING DIRECTOR		1	1	Х				745,006.	0.	46,075.
(17) RODNEY R. RUEBSAHM	40.00			Г						
MANAGING DIRECTOR]		X			l	746,532.	0.	541,613.

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(0	>)			(D)	(E)	(F)	
Name and title	Average	(do		Posi		than	one	Reportable	Reportable	Estimated	
	hours per	box,	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of				
	week (list any	Ь—						from the	from related	other	
	hours for	Jirecli				_		organization	organizations (W-2/1099-MISC)	compensation from the	
	related	ee or	stee			nsate		(W-2/1099-MISC)	(17 2) 1000 111100)	organization	
	organizations	individual trustee or director	institutional trustee		ag.	Highest compensated employee		,		and related	
	below	vidual	tutlor	1 55	Key employee	est co	늍			organizations	
	line)	Indi	Inst	Officer	Key	૱ F	P				
(18) SUSAN CHEN	40.00										
MANAGING DIRECTOR		Щ		X	<u> </u>		_	736,597.	0.	553,557.	
(19) UCHE ABALOGU	40.00	Į							_		
CHIEF TECHNOLOGY OFFICER		Ш		X	L.		_	454,690.	0.	158,959.	
(20) UZIEL YOELI	40.00							44	_		
MANAGING DIRECTOR		Ш		Х	<u> </u>			417,780.	0.	223,820.	
(21) JAMES RUSSELL KAMPFE	40.00				l				_		
MANAGING DIRECTOR				X		_		559,793.	0.	316,363.	
(22) CHRISTY WALLACE	40.00							400 -00	_		
EXEC.ASST./ASST.CORP.SECRETARY				X	_	<u> </u>		133,590.	0.	28,670.	
(23) ANNA CECILIA GONZALEZ	40.00										
CORPORATE COUNSEL & CCO		ļ			X		ļ	446,990.	0.	107,163.	
(24) HARLAND DOAK	40.00								_		
SENIOR DIRECTOR						Х	L.	429,433.	0.	262,480.	
(25) COURTNEY POWERS	40.00							44- 000	_		
SENIOR DIRECTOR	1.0.00				ļ	Х		445,820.	0.	302,106.	
(26) SCOTT BIGHAM	40.00				1	'			_		
SENIOR DIRECTOR				L	L	Х		440,495.	0.	39,985.	
1b Sub-total							10,214,012.		5160791.		
c Total from continuation sheets to Part						794,194.		573,721.			
d Total (add lines 1b and 1c)									5734512.		
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable											

compensation from the organization

Yes

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

3 X 4 X 5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
GLOBEARC LLC 544 EAST 86TH STREET, NEW YORK, NY 10028	IT CONSULTANT	896,892.
BLOOMBERG LP 731 LEXINGTON AVENUE, NEW YORK, NY 10022	FINANCIAL SERVICES	597,448.
THE BURGISS GROUP, 111 RIVER STREET, 10TH FLOOR, HOBOKEN, NJ 07030	FINANCIAL SERVICES	196,533.
DELOITTE & TOUCHE LLP 2200 ROSS AVENUE, DALLAS, TX 75201	AUDIT SERVICES	102,345.
FLOOR, HOBOKEN, NJ 07030 DELOITTE & TOUCHE LLP		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 4

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		Check if Schedule O cont	ains a response	or note to any lin		· · · · · · · · · · · · · · · · · · ·		
	_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
our s	b	Membership dues	1b					
S, C	С	Fundraising events	1c					
ar a	d	Related organizations	1d					
E,	e	Government grants (contribut	ions) 1e					
rion	f	All other contributions, gifts, gran	ts, and		!			
the		similar amounts not included abo	ve 1f			1		
ξO	q	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		•				
				Business Code			-	
e l	2 a	MANAGEMENT FEES		523920	31,517,266.	31,517,266.	-	-
Ž	b	BOARD ADVISORY FEES	-	523920	10,000.	10,000.	-	
Program Service Revenue	С						*	
am	d						·	···
R	e				·········		·	
Pro	f	All other program service reve	enue					
	a	Total. Add lines 2a 2f			31,527,266.			
	3	Investment income (including	dividends, inter					
		other similar amounts)	,	•	35,494.			35,494
	4	Income from investment of ta	x-exempt bond t	proceeds -				- · · · · · · · · · · · · · · · · · · ·
	5	Royalties						
			(ı) Real	(II) Personal				
	6 a	Gross rents	(7)1,001	(ii) i oloonai				
		Less rental expenses			•	*	*	* /
		Rental income or (loss)			*			*
		Net rental income or (loss)	<u> </u>	<u> </u>		-		٠
		Gross amount from sales of	(i) Securities	(II) Other		*, ·		
	/ "	assets other than inventory	(i) Securities	(il) Other	*	, ,		
	ا ا	Less cost or other basis		 				
	١ ،			3,432.				
		and sales expenses		<3,432.			*	
		Gain or (loss) Net gain or (loss)	L	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<3,432.		*	<3,432
	1		a avanta (aat		(3,432.			(3,432
venue	oa	Gross income from fundraisin including \$	-					
Ver			of					
Other Re		contributions reported on line				1		
Ъе́		Part IV, line 18	a]		
ŏ		Less direct expenses	b dravava avente	`L				
		Net income or (loss) from fund	•					
	9 a	Gross income from gaming ac		.]				
	Ι.	Part IV, line 19	a		•			
		Less direct expenses	, , b	`L				
		Net income or (loss) from gan	· ·	P	···			
	ן זט a	Gross sales of inventory, less]		
	Ι.	and allowances	a		:		•	
		Less cost of goods sold	b	`L				-
	<u> </u>	Net income or (loss) from sale		<u> </u>				
		Miscellaneous Revenu	ie	Business Code				
	11 a							
	b			<u> </u>	 -			
	C .	A.V		<u> </u>		<u> </u>		
	d	All other revenue		<u></u>			-	
	l	Total. Add lines 11a 11d		>	24 552 253	31 522 252		
	12	Total revenue See instructions			31,559,328.	31 527 266	0.	32 062.

Form 990 (2015) MANAGEMENT CO 74-2765082 Page 10 MANAGEMENT COMPANY

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	ner organizations must co	mplete column (A)	
	Check if Schedule O contains a respor				
	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				 ,
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				f
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	7,812,853.	5,859,640.	1,953,213.	<u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 01 1 1 1 1	0.405.600	H00 F00	
7	Other salaries and wages	9,817,149.	9,107,629.	709,520.	
8	Pension plan accruals and contributions (include	740 756	625 116	112 (40	
_	section 401(k) and 403(b) employer contributions)	748,756. 916,355.	635,116.	113,640.	
9	Other employee benefits	701,081.		139,076.	
10	Payroll taxes	/01,081.	594,677.	106,404.	
11	Fees for services (non-employees)				
a	Management	145,157.		145,157.	
b	Legal	53,520.	45,397.	8,123.	
_	Accounting	33,320.	43,331.	0,123.	
d	Lobbying Professional fundraising convices See Bart IV line 17	· · · · · · · · · · · · · · · · · · ·	,	<u></u> _	
e	Professional fundraising services See Part IV, line 17		<u> </u>		
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0	609,327.	516,849.	92,478.	
40	Advertising and promotion	005,521.	310,043.	JZ, 470.	
12	Office expenses	153,123.	129,883.	23,240.	
13 14	Information technology	1,080,043.	1,080,043.	23,210.	
15	Royalties	2,000,0131	2,000,0131		
16	Occupancy	1,019,474.	864,747.	154,727.	
17	Travel	632,220.	632,220.		
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,247.	24,809.	4,438.	
20	Interest	, = = = = = = = = = = = = = = = = = = =			
21	Payments to affiliates	· · · · · · · · · · · · · · · · · · ·			
22	Depreciation, depletion, and amortization	1,657,536.	1,405,969.	251,567.	
23	Insurance	40,698.	34,521.	6,177.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	CONTRACT SERVICES	298,391.	253,104.	45,287.	
b	REPAIRS AND MAINTENANCE	278,152.	235,937.	42,215.	
С	SUBSCRIPTIONS	205,639.	205,639.		
d	PROF.D&O LIABILITY	163,730.		163,730.	
е	All other expenses	481,098.	402,857.	78,241.	
25	Total functional expenses Add lines 1 through 24e	26,843,549.	22,806,316.	4,037,233.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if tollowing SOP 98-2 (ASC 958-720)				
E2201	0 12-16-15				Form 990 (2015)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 126,680. 166,032. Cash - non-interest-bearing 1 10,204,787. 15,461,229. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 49,739. 34,587. 4 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule I Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 8 Inventories for sale or use 625,322. 910,371. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10,073,688. 10a basis. Complete Part VI of Schedule D 7,393,762. 4,065,729. 2,679,926. 10b b Less accumulated depreciation 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 1,204,093 1,480,945. 15 15 Other assets See Part IV, line 11 16,276,350. 20,733,090. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 9,054,263. 8,743,616. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 1,470,030. 1,418,422. Schedule D 10,472,685. 10,213,646. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 0. Ω. 30 Capital stock or trust principal, or current funds 0. 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 5,803,665. 10,519,444.32 32 Retained earnings, endowment, accumulated income, or other funds 5,803,665. 10,519,444. 33 Total net assets or fund balances 33 20,733,090. 16,276,350. Total liabilities and net assets/fund balances

74-2765082 Page 12 MANAGEMENT COMPANY Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 31,559,328. Total revenue (must equal Part VIII, column (A), line 12) 1 26,843,549. 2 2 Total expenses (must equal Part IX, column (A), line 25) 4,715,779. Revenue less expenses. Subtract line 2 from line 1 3 5,803,665. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other changes in net assets or fund balances (explain in Schedule O) 9 0. Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 10,519,444. 10 column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII No Yes Accounting method used to prepare the Form 990. Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis Separate basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b Х If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Both consolidated and separate basis Consolidated basis Separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, Х review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Х Act and OMB Circular A-133? За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2015)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

THE UNIVERSITY OF TEXAS INVESTMENT

Employer identification number

74-2765082 MANAGEMENT COMPANY Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, rts supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (ı) Name of supported (III) Type of organization ιν) is the organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes No THE UNIV.OF TEXAS 30-0710145 6 0. 0. SYSTEM X

0.

0

Schedule A (Form 990 or 990 EZ) 2015 MANAGEMENT COMPANY

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Pa	rt II Support Schedule for	Organizations	Described in	Sections 170	0(b)(1)(A)(iv) and	d 170(b)(1)(A)	vi)			
L	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization									
	fails to qualify under the tests listed below, please complete Part III)									
Sec	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not		,							
	include any "unusual grants.")									
2	Tax revenues levied for the organ				1		}			
	ization's benefit and either paid to						İ			
	or expended on its behalf				<u> </u>					
3	The value of services or facilities			ļ	ļ		ļ			
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3			<u></u>	<u> </u>					
5	The portion of total contributions				1					
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included						ļ			
	on line 1 that exceeds 2% of the			1 -		1				
	amount shown on line 11,									
_	column (f)		<u> </u>			L	 			
6	Public support. Subtract line 5 from line 4		<u> </u>		<u> </u>	<u> </u>	<u> </u>			
	ction B. Total Support	(=\ 0014	45,0010	(-) 0010	4.00044	1-1-0045	(0 T-1-1			
_	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total			
7	Amounts from line 4			 	 	 				
8	Gross income from interest,									
	dividends, payments received on securities loans, rents, royalties			i						
	and income from similar sources			i						
9	Net income from unrelated business			 		 	 			
Ŭ	activities, whether or not the				ŀ					
	business is regularly carried on									
10	Other income Do not include gain			†			f			
	or loss from the sale of capital					1				
	assets (Explain in Part VI)									
11	Total support, Add lines 7 through 10			,		-				
	Gross receipts from related activities,	etc (see instructi	ons)			12				
13	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3)				
	organization, check this box and stop									
Se	ction C. Computation of Publ	ic Support Pe	rcentage							
14	Public support percentage for 2015 (line 6, column (f) d	ivided by line 11,	column (f))		14	<u>%</u>			
15	Public support percentage from 2014	Schedule A, Part	II, line 14			15	%			
16a	a 33 1/3% support test - 2015. If the o	organization did no	ot check the box o	on line 13, and line	e 14 is 33 1/3% or r	nore, check this b	ox and			
	stop here. The organization qualifies as a publicly supported organization									
ŧ	b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box									
	and stop here. The organization qual						ightharpoonup			
17	a 10% -facts-and-circumstances tes	_								
	and if the organization meets the "fac					rt VI how the orga	inization			
	meets the "facts-and-circumstances"	_			-		>			
- 1	10% -facts-and-circumstances tes	t - 2014. If the ord	anization did not	check a box on li	ne 13, 16a, 16b, or	17a, and line 15 s	10% or			

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990 EZ) 2015 MANAGEMENT COMPANY

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails	to
and formal and the tests lested below places complete Deat II.)	

Se	ction A. Public Support	siow, piease com	piete Part II)	 			
_	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and	14,2011	(5) 2012	(6) 2015	(0)2014	(6) 2013	ii) iolai
ľ	membership fees received. (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5					<u> </u>	
	a Amounts included on lines 1, 2, and 3 received from disqualified persons 5 Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		ļ				
	c Add lines 7a and 7b		<u> </u>	· · · · · · · · · · · · · · · · · · ·	ļ		
	Public support. (Subtract line 7c from line 6) ction B. Total Support		1	<u>}</u>	<u> </u>	1	
Cal	endar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
1	b Unrelated business taxable income					1	
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support (Add lines 9, 10c, 11, and 12)		<u></u>	<u> </u>	L	L	L
14	First five years. If the Form 990 is for	the organization	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
<u></u>	check this box and stop here	ic Support Pr	rcentage				▶∟
_	Ction C. Computation of Public			actions (f)		145]	
15	,, ,		•	column (I))		15	%
16 Se	Public support percentage from 2014 ction D. Computation of Inves					1 10 1	%
	Investment income percentage for 20				 -	17	%
				ne 13, column (i)		18	9/
18	a 33 1/3% support tests - 2015. If the			on line 14, and line	e 15 is more than		···
13	more than 33 1/3%, check this box ar	=					., .3 Hot
	b 33 1/3% support tests - 2014. If the						and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organizatio						

| Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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Part W Supporting Organizations (continued) Yes No	Sche	dule A (Form 990 or 990 EZ) 2015 MANAGEMENT COMPANY 74-2	76508	2 Pa	age 5
A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the government body or a supported organization? A part of the directors, further and the persons described in (b) and (c) below, the government of the supported in (d) above? A possible controlled entity of a person described in (d) a toy to above? If Yes' to a, b, or c, provide detail in Part IV. The Control of the directors, furthers or memberally of one or more supported organizations have the power to regularly apoint or effect at least a majurity of the organizations directors or furthers at all times during the tax year? If No. describe in Part IV how the supported organizations directors or furthers at all times during the tax year? If No. describe in Part IV how the supported organizations described how the power to appoint and/or remove directors or trustess were allocated among the supported organization, chastoche how the power to appoint and/or remove directors or trustess were allocated among the supported organizations or restrictions, if any, applied to such powers during the tax year. Did the organization operated for the benefit of any supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organizations of the supported organizations of the supported organizations of the supported organizations or trustees of each of the organizations supported organizations. 1. Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of t	_	t IV Supporting Organizations (continued)			
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b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		how the organization was responsive to those supported organizations, and how the organization determined	1	1	
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		that these activities constituted substantially all of its activities	2a		
reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement 2b 3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <i>Part VI</i> . b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		activities but for the organization's involvement	_ 2b		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <i>Part VI</i> . b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3	Parent of Supported Organizations Answer (a) and (b) below.			
trustees of each of the supported organizations? Provide details in <i>Part VI</i> . b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	а	···	1		-
			3a		_
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u> </u>	

Schedule A (Form 990 or 990-EZ) 2015 MANAGEMENT COMPANY 74-2765082 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions Other gross income (see instructions) 3 4 4 Add lines 1 through 3 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities 1a 1b **b** Average monthly cash balances c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 2 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)

Leck here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions)

Schedule A (Form 990 or 990-EZ) 2015 MANAGEMENT COMPANY 74-2765082 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions 6 Total annual distributions. Add lines 1 through 6 8. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2015 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (iii) (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2015 Amount for 2015 Distributable amount for 2015 from Section C, line 6 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: b d From 2013 e From 2014 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2015 distributable amount Carryover from 2010 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2015 from Section D, a Applied to underdistributions of prior years **b** Applied to 2015 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2016. Add lines 3j and 4c Breakdown of line 7: а h c Excess from 2013

Schedule A (Form 990 or 990-EZ) 2015

d Excess from 2014
 e Excess from 2015

Schedule A	(Form 990 or 990 EZ) 2015 MANAGEMENT COMPANY	/4-2765082 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1, Pasection D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any add (See instructions.)	a or 17b, Part III, line 12, es 1 and 2, Part IV, Section C, rt V, Section B, line 1e; Part V,
	(See Instructions.)	
<u>—</u>	,	
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs gov/form990.

2015
Open to Public Inspection

Name of the organization

THE UNIVERSITY OF TEXAS INVESTMENT MANAGEMENT COMPANY

Employer identification number 74-2765082

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure J Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year **▶** \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

	,	VERSIII OF ENT COMPAN		2 TT/ A	POINTN	-	7	1 27	65000	Page 2
	adio 2 (1 01111 000) 2010			T		O4b				
3	Using the organization's acquisition, accessi	on, and other record	is, check a	ny of the	tollowing tha	at are a sig	nificant u	se of its	collection	items
	(check all that apply)				L					
a	Public exhibition	a			hange progra	ams				
b	Scholarly research	е	LJ Oth							
C	Preservation for future generations Provide a description of the organization's co	allactions and explain	n how thou	further t	ho organizati	on's avam	nt ourne	so in Par	+ VIII	
4 5	During the year, did the organization solicit of	•	-		_			se iii raii	ı Aiii	
3	to be sold to raise funds rather than to be ma		•		-	ici Siriliai e	100010		Yes	□ No
Par	t IV Escrow and Custodial Arran					"Ves" on F	orm 990	Part IV		140
	reported an amount on Form 990, Pa		ste ii tile oi	garnzado	ii ai iswered	103 0111	Om 550,	i ait iv,	III 16 3, OI	
1a	Is the organization an agent, trustee, custod		dary for co	ntribution	s or other as	ssets not in	ncluded			
	on Form 990, Part X?		, ,						Yes	□ No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tab	le					2 .00	
-	Too, oxplan are analysine in a arrain								Amount	
С	Beginning balance						1c		7 11110 0711	
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for esc	row or cu	ustodial acco	ount liability	y?		Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	planation l	has been	provided on	Part XIII				
Par	t V Endowment Funds. Complete	f the organization an	swered "Y	es" on Fo	orm 990, Par	t IV, line 10)			
		(a) Current year	(b) Prio	r year	(c) Two yea	rs back (c	I) Three ye	ars back	(e) Four y	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
đ	Grants or scholarships									
е	Other expenditures for facilities								ĺ	
	and programs									
f	Administrative expenses									
g	End of year balance				<u> </u>				L	
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1g,	column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	<u></u> %								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	· ·								
За	Are there endowment funds not in the posse	ession of the organization	ation that a	re held a	nd administe	ered for the	e organiza	ition	_	
	by-									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
	If "Yes" on line 3a(ii), are the related organiza	•							3b	
4 Day	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipn		owment tur	as						
Fai) Dort IV li	no 110 S	Can Form 000	n Dowl V III	no 10			
	Complete if the organization answere	- 1	T -				_	. —	4-0 D1	
	Description of property	(a) Cost or o basis (investr			or other (other)		cumulated eciation	'	(d) Book	value
-	Land	2033 (1114630		D0313	(outor)	черг	- CONTRACTOR	+		
	Land Buildings	 					•			
	Leasehold improvements			3.30	6,744.	3.2	29,49	9	77	,245.
	Equipment				4,724.		39,64			,081.
	Other				2,220.		$\frac{33,61}{24,62}$,600.
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. column							,926.
	1			 						

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 MANAGEMENT	COMPANY		74-2765082 Page 3
Part VII Investments - Other Securities.	<u> </u>		
Complete if the organization answered "Ye	es" on Form 990, Part IV	/, line 11b See Form 990, Part X, line 12	
(a) Description of security or category (including name of security	y) (b) Book value	(c) Method of valuation Cost or	end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			· · · · · · · · · · · · · · · · · · · ·
(A)			W-1
(B)			
(C)			
(D)	_		
(E)			
(F)	_		
(G)	_		
(H)	_		
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			····
Part VIII Investments - Program Related		/	
Complete if the organization answered "Yo	(b) Book value		end of year market value
	(b) Book value	(c) Welliod of Validation Cost of	end of year market value
(1)			
(2)	- 		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	_		
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)	>	3	
Part IX Other Assets.			
Complete if the organization answered "Ye	es" on Form 990, Part IV	/, line 11d See Form 990, Part X, line 15	
	(a) Description		(b) Book value
(1) ARTWORK TOTAL			10,915.
(2) DEFERRED COMPENSATION PI	LAN ASSETS (457B)	1,470,030.
(3)			
(4)			
(5)			
(6)			
(9)			1 400 045
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities.		-	1,480,945.
	es" on Form 990, Part I	/, line 11e or 11f See Form 990, Part X, lin	e 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes	23.037	1 450 030	
(2) DEFERRED COMP.PLAN OBLIC	JAT'LON	1,470,030.	
(3)			
(4)	<u></u> .		
(5)			
(6)			•

1,470,030.

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

(8)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

74-2765082 Page 4 MANAGEMENT COMPANY Schedule D (Form 990) 2015 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 31,559,328. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments 2a b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 31,559,328. 3 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII) c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements 26,843,549. Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2a 2b **b** Prior year adjustments c Other losses 2c d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 2e 26,843 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4b **b** Other (Describe in Part XIII) c Add lines 4a and 4b 4c 26,843,549. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part XI, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

SCHEDULE J (Form 990)

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE UNIVERSITY OF TEXAS INVESTMENT MANAGEMENT COMPANY

Employer identification number 74-2765082

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee X Independent compensation consultant X Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization X a Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X a The organization? X b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. a The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments Х not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficits	(6)(1)-(0)	reported as deferred on prior Form 990
(1) WILLIAM H. MCRAVEN	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR/VICE CHAIRMAN FOR POLICY	(ii)	1,086,627.	300,000.	7,433.	22,525.	13,306.		0.
(2) BRUCE E. ZIMMERMAN	(1)	701,946.	1,660,130.	3,223.	1,464,056.	24,550.	3,853,905.	1,562,957.
CEO & CIO	(ii) [0.	0.	0.	0.	0.	0.	0.
(3) MARK J. WARNER	(1)	379,200.	562,959.	2,728.	738,106.	22,296.	1,705,289.	536,981.
SENIOR MANAGING DIRECTOR	(ii) [0.	0.	0.	0.	0.	0.	0.
(4) JOAN B. MOELLER	(i)	315,610.	269,649.	3,028.	245,976.	9,121.	843,384.	269,649.
SR.MNG.DIR., CORP.SEC.& TREASURER	[(ir) [0.	0.	0.	0.	0.	0.	0.
(5) LINDEL EAKMAN	(i)	215,245.	483,894.	59,674.	22,525.	17,539.	798,877.	459,995.
MANAGING DIRECTOR	(ii) [0.	0.	0.	0.	0.	0.	0.
(6) MARK SHOBERG	(i)	317,947.	424,031.	3,028.	22,525.	23,550.	791,081.	410,401.
MANAGING DIRECTOR	(ii)	0.	Ö.	0.	0.	0.	0.	0.
(7) RODNEY R. RUEBSAHM	(1)	296,336.	447,168.	3,028.	518,119.	23,494.	1,288,145.	434,737.
MANAGING DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) SUSAN CHEN	(i)	295,692.	438,177.	2,728.	536,494.	17,063.	1,290,154.	393,063.
MANAGING DIRECTOR	(0)	0.	0.	0.	0.	0.	0.	0.
(9) UCHE ABALOGU	(i)	281,364.	168,780.	4,546.	135,493.	23,466.	613,649.	166,219.
CHIEF TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) UZIEL YOELI	(i)	211,979.	202,773.	3,028.	200,917.	22,902.	641,599.	156,275.
MANAGING DIRECTOR	[(ii) [0.	0.	0.	0.	0.	0.	0.
(11) JAMES RUSSELL KAMPFE	(i)	229,613.	329,252.	928.	292,813.	23,550.	876,156.	328,810.
MANAGING DIRECTOR	(ii) [0.	0.	0.	0.	0.	0.	0.
(12) CHRISTY WALLACE	(i)	117,165.	14,400.	2,025.	10,412.	18,257.	162,259.	14,400.
EXEC.ASST./ASST.CORP.SECRETARY	[(ii) [0.	0.	0.	0.	0.	0.	0.
(13) ANNA CECILIA GONZALEZ	(i)	259,610.	184,952.	2,428.	97,042.	10,121.	554,153.	177,560.
CORPORATE COUNSEL & CCO	[(ii)	0.	0.	0.	0.	0.	0.	0.
(14) HARLAND DOAK	(1)	189,613.	237,392.	2,428.	238,931.	23,550.	691,914.	207,727.
SENIOR DIRECTOR	(ii) [0.	0.	0.	0.	0.	0.	0.
(15) COURTNEY POWERS	(1)	193,030.	250,362.	2,428.	278,640.	23,466.	747,926.	212,499.
SENIOR DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) SCOTT BIGHAM	(1)	198,989.	239,078.	2,428.	17,425.	22,560.	480,480.	202,753.
SENIOR DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2 and/or 1099-MISC compensation		SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(17) EDWARD LEWIS	(1)	191,510.	209,478.	2,428.	271,892.	19,226.		158,631.
SENIOR DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) AMANDA HOPPER	(i)	183,554.	205,096.	2,128.	254,661.	27,942.	673,381.	165,752.
SENIOR DIRECTOR	(11)	0.	0.	0.	0.	0.	0.	0.
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	(0)							
	(ii)							
	(0)							
	(ii)							

Part III	Supplemental Information
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Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

SCHEDULE J, PART 1, LINE 4B AND 7

FOLLOWING ARE THE NAMES OF THE LISTED PERSONS PAID AMOUNTS FOR THE 2015

CALENDAR YEAR UNDER AN ARRANGEMENT DESCRIBED IN 4B:

BRUCE E. ZIMMERMAN	\$1	,660,130
MARK J. WARNER	\$	562,959
LINDEL EAKMAN	\$	483,894
RODNEY R. RUEBSAHM	\$	447,168
SUSAN CHEN	\$	438,177
MARK SHOBERG	\$	424,031
JAMES RUSSELL KAMPFE	\$	329,252
JOAN B. MOELLER	\$	269,649
UZIEL YOELI	\$	202,773
ANNA CECILIA GONZALEZ	\$	184,952
UCHE ABALOGU	\$	168,780
COURTNEY POWERS	\$	250,362
SCOTT BIGHAM	\$	239,078
HARLAND DOAK	\$	237,392
EDWARD LEWIS	\$	209,478

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

AMANDA HOPPER \$ 205,096

AS DISCUSSED IN SCHEDULE O, PART VI, SECTION B, LINE 15A AND B, BASE SALARIES AND PERFORMANCE INCENTIVE AWARDS OF KEY INVESTMENT AND OPERATIONS EMPLOYEES ARE DETERMINED PURSUANT TO THE PROVISIONS OF THE UTIMCO COMPENSATION PROGRAM (THE PLAN). THE PERFORMANCE INCENTIVE AWARD PROVISIONS OF THE PLAN ARE CONSIDERED A NONQUALIFIED RETIREMENT THE PLAN IS AN UNFUNDED, UNSECURED LIABILITY OF THE PLAN UNDER 457(F). ORGANIZATION TO MAKE PAYMENTS IN ACCORDANCE WITH THE PROVISIONS OF THE PLAN. THE UTIMCO BOARD ANNUALLY SELECTS THE PARTICIPANTS IN THE PLAN FOR A PERFORMANCE PERIOD (SEPT 1 TO AUG 31). THE PARTICIPANTS MAY BE MEASURED AGAINST TWO CATEGORIES OF PERFORMANCE GOALS: (1) ENTITY PERFORMANCE AND (2) QUALITATIVE PERFORMANCE GOALS. THE QUALITATIVE GOALS ARE ESTABLISHED ANNUALLY BY THE PARTICIPANT, IN CONJUNCTION WITH THE CEO, AND APPROVED BY THE COMPENSATION COMMITTEE OR UTIMCO BOARD. UPON COMPLETION OF THE PERFORMANCE PERIOD, THE COMPENSATION COMMITTEE AND UTIMCO BOARD DETERMINE A PARTICIPANT'S LEVEL OF ACHIEVEMENT AGAINST THE PARTICIPANT'S ESTABLISHED GOALS. BASED ON THE DETERMINATION OF LEVEL OF ACHIEVEMENT, A PERFORMANCE INCENTIVE AWARD IS AWARDED. FIFTY

MANAGEMENT COMPANY

Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information •

PERCENT TO ONE HUNDRED PERCENT OF THE PERFORMANCE INCENTIVE AWARD IS PAID TO THE PARTICIPANT WITHIN 150 DAYS OF THE COMPLETION OF THE PERFORMANCE PERIOD BUT NO LATER THAN THE END OF THE CALENDAR YEAR IN WHICH PERFORMANCE PERIOD ENDS. ZERO TO FIFTY PERCENT OF THE PERFORMANCE INCENTIVE AWARD IS TREATED AS A NONVESTED DEFERRED AWARD, SUBJECT TO THE TERMS OF THE PLAN. THE PERCENTAGE TREATED AS A NONVESTED DEFERRED AWARD IS DETERMINED BY THE PLAN, BASED ON EACH ELIGIBLE POSITION. ONE THIRD OF THE NONVESTED DEFERRED AWARD WILL VEST IN EACH OF THE FOLLOWING THREE YEARS ON THE ANNIVERSARY DATE OF THE PERFORMANCE PERIOD. IN CERTAIN CIRCUMSTANCES, AWARDS MAY BE SUBJECT TO HAIRCUT OR CLAWBACK PROVISIONS OR EXTRAORDINARY MANDATORY DEFERRALS. WHEN A PARTICIPANT MEETS THE RETIREMENT PROVISIONS OF THE PLAN, THE PARTICIPANT'S NONVESTED DEFERRED AWARD WILL AUTOMATICALLY VEST AND ANY FUTURE AWARDS WILL VEST UPON BEING AWARDED BY THE UTIMCO BOARD.

EXCEPT IN LIMITED CIRCUMSTANCES, SUCH AS THE DEATH OR DISABILITY OF A PARTICIPANT, OR INVOLUNTARY TERMINATION FOR REASONS OTHER THAN CAUSE, A PARTICIPANT WHO IS NO LONGER EMPLOYED WITH UTIMCO ON AN ANNIVERSARY DATE WILL FORFEIT ANY NONVESTED DEFERRED AWARDS.

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

THE UNIVERSITY OF TEXAS INVESTMENT | Emplo MANAGEMENT COMPANY

Employer identification number 74-2765082

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TO PROVIDE PROFESSIONAL INVESTMENT MANAGEMENT AND RELATED SERVICES FOR THE FUNDS UNDER MANAGEMENT AND CONTROL OF THE BOARD OF REGENTS OF THE UNIVERSITY OF TEXAS SYSTEM.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TO GENERATE SUPERIOR LONG-TERM INVESTMENT RETURNS TO SUPPORT THE UNIVERSITY OF TEXAS AND TEXAS A&M UNIVERSITY SYSTEMS AS THEY PROVIDE WORLD-CLASS TEACHING, PUSH THE BOUNDARIES OF DISCOVERY, AND ACHIEVE EXCELLENCE IN PATIENT HEALTH CARE FOR THE PEOPLE OF TEXAS AND BEYOND.

FORM 990, PART VI, SECTION A, LINE 7A:

UTIMCO IS GOVERNED BY A NINE-MEMBER BOARD OF DIRECTORS AS REQUIRED BY TEXAS EDUCATION CODE, SECTION 66.08. UTIMCO'S BOARD OF DIRECTORS CONSISTS OF SEVEN MEMBERS APPOINTED BY THE UT SYSTEM BOARD OF REGENTS AND TWO MEMBERS APPOINTED BY THE TEXAS A&M SYSTEM BOARD OF REGENTS. THE SEVEN MEMBERS APPOINTED BY THE UT SYSTEM BOARD OF REGENTS SHALL INCLUDE AT LEAST THREE MEMBERS OF THE UT SYSTEM BOARD, ONE QUALIFIED INDIVIDUAL AS DETERMINED BY THE UT SYSTEM BOARD WHICH MAY INCLUDE THE CHANCELLOR OF THE UT SYSTEM AND THREE WITH SUBSTANTIAL BACKGROUND AND EXPERTISE IN INVESTMENTS. OF THE TWO MEMBERS APPOINTED BY THE TEXAS A&M SYSTEM BOARD, ONE MUST HAVE SUBSTANTIAL BACKGROUND AND EXPERTISE IN INVESTMENTS. ALL DIRECTORS HAVE EQUAL VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7B:

AS STATED IN 7A ABOVE, THE BOARD OF REGENTS OF THE UNIVERSITY OF TEXAS

SYSTEM APPOINTS SEVEN OF THE UTIMCO DIRECTORS AND THE BOARD OF REGENTS OF
TEXAS A&M UNIVERSITY SYSTEM APPOINTS TWO. PURSUANT TO AN INVESTMENT
MANAGEMENT SERVICES AGREEMENT, UTIMCO IS GRANTED AUTHORITY TO ACT FOR THE
UT BOARD OF REGENTS IN THE INVESTMENT OF THE FUNDS UNDER THE MANAGEMENT AND
CONTROL OF THE UT BOARD OF REGENTS. HOWEVER, THE UT BOARD OF REGENTS HAS
RETAINED FINAL APPROVAL FOR THE INVESTMENT POLICY STATEMENTS COVERING THE
FUNDS UNDER INVESTMENT, THE SELECTION OF THE EXTERNAL AUDITOR FOR THE
FUNDS, AND THE SELECTION OF THE CUSTODIAN. IN ADDITION, THE UT BOARD OF
REGENTS APPROVES THE PROPOSED ANNUAL UTIMCO OPERATING AND CAPITAL BUDGETS
AND KEY GOVERNANCE DOCUMENTS, INCLUDING THE ARTICLES OF INCORPORATION,
BYLAWS, CODE OF ETHICS, AND UTIMCO COMPENSATION PROGRAM.

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 IS COMPLETED BY UTIMCO STAFF. THE SENIOR MANAGING DIRECTOR OF ACCOUNTING, FINANCE AND ADMINISTRATION, WHO ALSO SERVES AS THE CORPORATION'S SECRETARY AND TREASURER, WITH THE ASSISTANCE OF THE CORPORATION'S CORPORATE COUNSEL AND CHIEF COMPLIANCE OFFICER AND AN INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT, PERFORMED A DETAILED, LINE BY LINE REVIEW OF THE INFORMATION REPORTED BY UTIMCO STAFF. THE 990 WAS PROVIDED TO THE INTERIM CEO AND CHIEF INVESTMENT OFFICER AND TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL UTIMCO DIRECTORS AND EMPLOYEES ARE REQUIRED TO FILE, UPON COMMENCEMENT OF ASSOCIATION WITH UTIMCO, AND ANNUALLY THEREAFTER, A FINANCIAL DISCLOSURE STATEMENT DISCLOSING PERSONAL INVESTMENTS AND RELATIONSHIPS THAT HAVE THE POTENTIAL TO CREATE CONFLICTS OF INTEREST WITH THE CORPORATION. CONFLICTS CHECKS ARE ALSO PERFORMED BEFORE ANY INVESTMENT IS MADE. ADDITIONALLY, THE

Name of the organization THE UNIVERSITY OF TEXAS INVESTMENT MANAGEMENT COMPANY

Employer identification number 74-2765082

UTIMCO CHIEF COMPLIANCE OFFICER REVIEWS THE STATEMENTS FILED BY DIRECTORS AND KEY EMPLOYEES AND PERIODICALLY REVIEWS PUBLICLY AVAILABLE RESOURCES TO INDEPENDENTLY VERIFY THE INFORMATION CONTAINED IN THE FINANCIAL DISCLOSURE STATEMENTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE UTIMCO BOARD CREATED A COMPENSATION COMMITTEE IN 1996. THIS COMMITTEE IS TASKED WITH DETERMINING THE BASE SALARIES AND PERFORMANCE INCENTIVE AWARDS OF KEY INVESTMENT AND OPERATIONS EMPLOYEES (OTHER THAN THE CEO). PURSUANT TO THE PROVISIONS OF THE UTIMCO COMPENSATION PROGRAM (THE PLAN). THE COMPENSATION COMMITTEE IS ALSO TASKED WITH RECOMMENDING TO THE UTIMCO BOARD OF DIRECTORS THE BASE SALARY AND PERFORMANCE INCENTIVE AWARD OF THE CEO. PURSUANT TO THE PLAN, THE COMMITTEE MUST HIRE AN INDEPENDENT CONSULTANT AT LEAST ONCE EVERY THREE YEARS TO PERFORM A COMPENSATION BENCHMARKING STUDY. THE INDEPENDENT CONSULTANT ALSO WORKS CLOSELY WITH THE COMMITTEE ON PLAN DESIGN. IN YEARS IN WHICH A FORMAL STUDY IS NOT PERFORMED, BASE SALARIES MAY BE ADJUSTED BASED ON APPROPRIATE PUBLISHED COMPENSATION SURVEYS. THE LAST COMPENSATION BENCHMARKING STUDY WAS COMPLETED IN AUGUST 2015. THE SPECIFIC POSITIONS INCLUDED IN THE SALARY BENCHMARKING STUDY PERFORMED BY THE OUTSIDE CONSULTANT COMPLETED IN AUGUST 2015 WERE AS FOLLOWS:

INVESTMENT PROFESSIONALS:

CEO & CHIEF INVESTMENT OFFICER

SENIOR MANAGING DIRECTOR, INVESTMENT

MANAGING DIRECTOR, INVESTMENT

SENIOR DIRECTOR, INVESTMENT

SENIOR PORTFOLIO MANAGER

Schedule O (Form 990 or 990-EZ) (2015)

532212 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization THE UNIVERSITY OF TEXAS INVESTMENT MANAGEMENT COMPANY	Employer identification number 74-2765082
FOR INSPECTION OR COPYING TO THE REQUESTOR.	····
FORM 990, PART VIII, LINE 2(B)	
UTIMCO RECEIVED A FEE ON BEHALF OF AN EMPLOYEE WHO SERVED	AS AN
ADVISORY BOARD MEMBER FOR A PRIVATE EQUITY INVESTMENT.	
FORM 990, PART VIII, LINE 7(C):	
COMPUTER EQUIPMENT WAS DISPOSED OF BECAUSE IT BECAME OBSO	LETE. IT WAS
NOT FULLY DEPRECIATED SO A LOSS ON DISPOSAL WAS RECORDED.	
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	10,410
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532212 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)